

Rachel Baker

Town

County

Died at *Near Shrewells**Worcester*

MARYLAND

Date 1902 *April 1st*

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902 *April 1st*Age *78**Md**housework*~~Male~~

White

~~Married~~

Widow

~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

Husband  
ofWife *Benton Baker*

Father's

Name

Mother's

Maiden Name

Cause of

Primary

*Dropsy*

Death

Immediate

*No*

How long sick

*Don't know*~~Accident, Suicide, Homicide~~

Reported by

*Penner Watson*

Address

*Selbyville Del**By Timothy Rayne**Bishopville Md*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Priscilla Ann White Bratten

Town

County

Died at

Snow Hill

Worcester

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

4

8

Age

59-5-25

Md.

Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

3

Husband

of

Wife

William L. Bratten

Father's

Name

George Hudson

Mother's

Maiden Name

Julia

Bynsock

Cause of

Primary

Congestion of the lungs

How long sick

1/2 hour

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

L. P. Jones M.D.

Address

Snow Hill Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79998



Meadia Collicie

Town

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

Age

~~Male~~

White

Married

Widow

Divorced

Female

Colored

Single

~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Death

Immediate

How long sick

~~Accident, Suicide, Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

*James B. Dickinson*  
 Town *Berlin* County *Worcester*

Died at

*Symposium*  
 Month *4* Day *3*

MARYLAND

Date 19

*02*

Y. M. D.

Age

*74*

Native of

Occupation

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's Name

*Bachelor*  
*John C*

Mother's

Maiden Name

*Catherine*  
*Catherine Bessard*

Cause of

Primary

*Apoplexy*

Death

Immediate

How long sick

*Wx*

Accident, Suicide, Homicide

Reported by

Address

*James B. Dickinson*  
*Berlin Md.*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70888





Name in Full

Certificate of Death

*Wilmer James Druffy*

Town

County

Died at

MARYLAND

Died at *near Sunnys mill* *Worcester*

Date 1902 *April 29* Month Day

Age *46 - 2 - 10* Y. M. D.

Native of *Worcester* Occupation *Miller*

Male *White* Married *Widow* Divorced

*Female* Colored Single *Widower* Number of children living *5*

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Death

Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 72808



Name in Full *Joseph J Duncan*  
 Town *Campbells* County *Worcester* MARYLAND  
 Died at *Campbells* Month *April* Day *8* Y. *56* M. *40* D. *40* Native of *Ind* Occupation *farmer*  
 Date 19 *02* April *8* Age *56* Male *White* Married *Widow* Divorced *Widower* Number of children living *4*  
 Husband of

Wife  
 Father's Name *William Duncan* Mother's Maiden Name

Cause of Death { Primary *Cancer of Stomach* Immediate *No* How long sick *12 months*  
 Accident, Suicide, Homicide

Reported by *George Walsten* *Timothy Rayne*  
 Address *Campbells Ind* *Bishopville Ind*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Died at

Town

County

MARYLAND

Date 19

Month

Day

Age

M.

D.

Native of

Occupation

Male

White

Married

Widow

~~Divorced~~

Female

Colored

~~Single~~~~Widower~~

Number of children living

2

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Death

Immediate

How long sick

~~Accident, Suicide, Homicide~~

Reported by

Address

Must be signed by physician, If any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888



Wife of Larsen Johnson  
 Town County

Died at New Bishop

Worcester

MARYLAND

Date 1902 April 18 Age 33 Y. M. D. Native of Md Occupation house work  
 Male White Married Widow Divorced  
 Female Colored Single Widower Number of children living

Husband of Larsen Johnson  
 Wife of Larsen Johnson  
 Father's Name Not known Mother's Maiden Name

Cause of Death { Primary Drowning  
 Immediate No

How long sick

Sent home

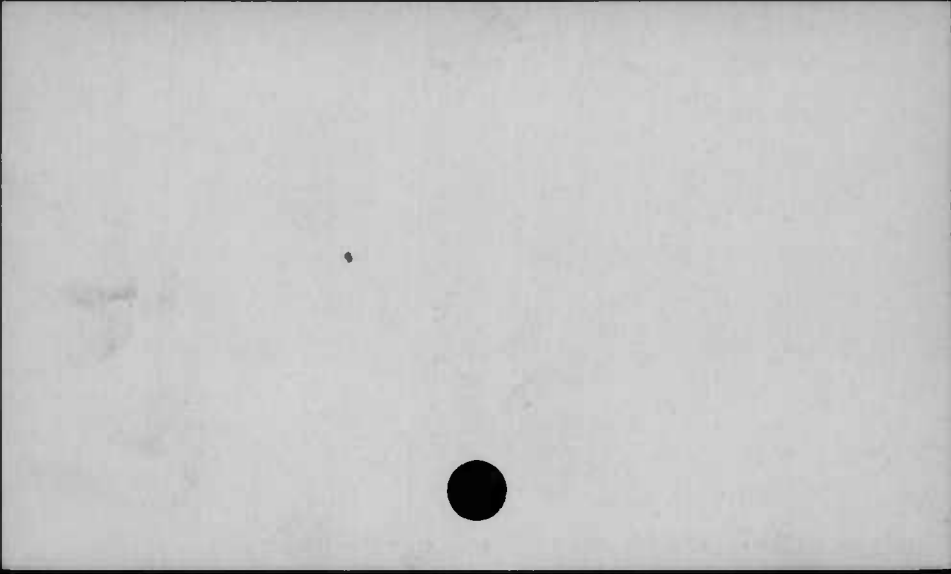
~~Accident, Suicide, Homicide~~

Reported by Farmer Watson

by Timothy Rayner  
 Bishopville Md

Address Salbyville Del

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Certificate of Death

Blanch Merritt

Town

County

Died at

Stoughton

Worcester

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

4

17

Age

6

-

-

Va

-

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband  
of

Wife

Father's

Name

George Merritt

Mother's

Maiden Name

M. E. Merritt

Cause of

Primary

Burned

167

How long sick

-

Death

Immediate

" "

Accident, Suicide, Homicide

Reported by

John D. Dickerson M.D.

Address

Stoughton Mass

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 72299



Name In Full

Certificate of Death

*Priscilla H. H. Milbourne*  
 Town County

Died at *Snow Hill* *82* *Worcester* MARYLAND

Data 1902 *4* *15* *82* Y. M. D. Native of *Ind* Occupation *Marion*  
 Male White Married Widow Divorced  
 Female Colored Single Widower Number of children living *1*

Husband of *Isador Milbourne* Wife *Mary H. White*  
 Father's Name Mother's Name  
 Maiden Name

Cause of Death { Primary *Old age* Immediate *Nervous prostration* }  
 How long sick *6 months*  
 Accident, Suicide, Homicide

Reported by *L. P. Jones M.D.*  
 Address *Snow Hill Md*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Wray and Ben<sup>th</sup>

Post 7 miles

Name in Full		Milton Powell		Town		County		Died at		Friendship Horrocks		MARYLAND																									
Date 19		02		Month		4		Day		15		Age		7		Y.		M.		D.		Native of		Md.		Occupation		—									
Male		<input checked="" type="checkbox"/>		Female		<input type="checkbox"/>		White		<input checked="" type="checkbox"/>		Colored		<input type="checkbox"/>		Married		<input checked="" type="checkbox"/>		Single		<input type="checkbox"/>		Widow		<input checked="" type="checkbox"/>		Divorced		<input type="checkbox"/>		Widower		Number of children living		—	
Husband		of		Wife		—		Father's		Name		Engine Powell		Mother's		Maiden Name		Ella Grey		Cause of		Primary		Tubercular meningitis.		How long sick		21 days		Death		Immediate		— Accident, Suicide, Homicide —			
Reported by		Elee Holland		Address		Berlin		Md.		Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.																											



Name In Full

Certificate of Death

Stephen A Redden

Died at <sup>Town</sup> Pocomoke <sup>County</sup> Worcester

MARYLAND

Date 1902 <sup>Month</sup> April <sup>Day</sup> 2<sup>nd</sup> <sup>Y.</sup> <sup>M.</sup> <sup>D.</sup> Age 68 <sup>Native of</sup> Maryland <sup>Occupation</sup> Farmer

Male White Married ~~Widow~~ ~~Divorced~~ ~~Widower~~ Number of children living 5

Husband of Etta A Young Angelo

Wife

Father's Name Nehemiah Redden Mother's Name Susan Taylor

Cause of Primary Angina Pectoris How long sick 2 months

Death Immediate Heart Failure 80 Accident, Suicide, Homicide

Reported by Isaac J Costen

Address  Pocomoke Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.





Name in Full

Certificate of Death

Glydes Smith

Died at <sup>Town</sup> Ocean city <sup>County</sup> Worcester MARYLAND

Date 1902 <sup>Month</sup> 4 <sup>Day</sup> 11 | <sup>Age</sup> — — 27 | <sup>Native of</sup> Ocean city | <sup>Occupation</sup> —

~~Male~~ <sup>White</sup> ~~Married~~ <sup>Widow</sup> ~~Divorced~~  
<sup>Female</sup> ~~Colored~~ <sup>Single</sup> ~~Widower~~ <sup>Number of children living</sup>

Husband of <sup>Wife</sup> Henry Smith  
 Father's Name <sup>Mother's</sup> unknown <sup>Maiden Name</sup> Anne Sanders

Cause of Death { <sup>Primary</sup> ———— | <sup>How long sick</sup>  
<sup>Immediate</sup> Dr. Wm. J. Hearne | ~~Accident, Suicide, Homicide~~

Reported by

Address Ocean city 151 Worcester Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Laura Redden Stanford  
 Town County

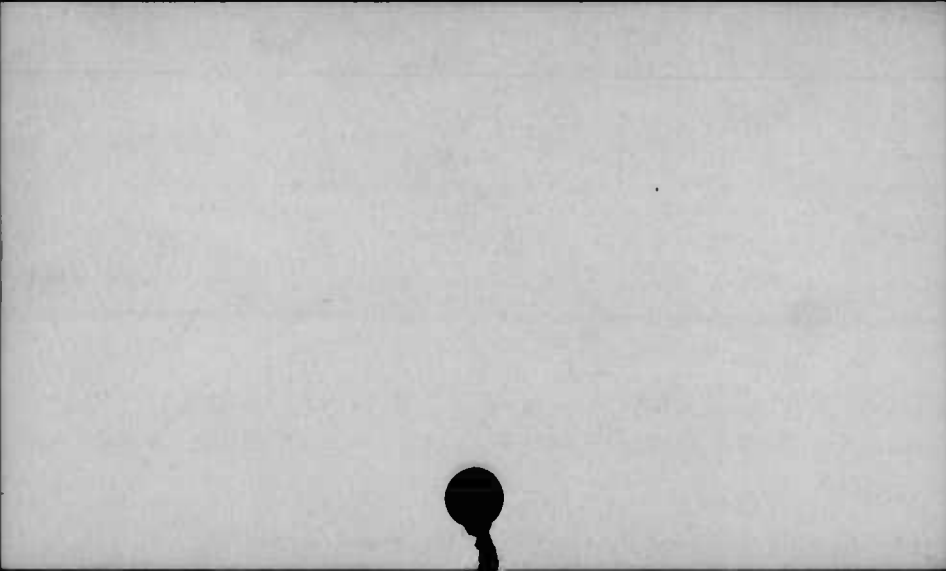
Died at Grindtree road State of MARYLAND

Date 1902 4 12 Age 35- - Native of Md Occupation House wife  
~~Male~~ White Married ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 3

Wife of Jesse Stanford  
 Father's Name James Redden Mother's Name Elizabeth Mitchell  
 Cause of Death Primary Consumption How long sick 12 months  
 Immediate Consumption Accident, Suicide, Homicide

Reported by Hancock & Snack undertakers  
 Address Stanton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Uphur L Wallis

Town

County

MARYLAND

Died at

Melbourne

Worcester

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

2

4

23

Age

1-6-

ma

Infant

Male

Colored

Single

Number of children living

Father's

Name

Levin Mills

Mother's

Name

Emma Wallis

Cause of

Primary

Croup

Death

Immediate

Croup

How long sick

3 months

Accident, Suicide, Homicide

Reported by

W. J. Roberts

Address

Melbourne

ma

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

